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PTO/SB/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	REGIM 3.3-048
	First Named Inventor	Philippe Bernard
	COMPLETE IF KNOWN	
	Application Number	UNKNOWN
	Filing Date	January 26, 2005
	Group Art Unit	N/A
	Examiner Name	Not Yet Assigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am an original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL SUBSTITUTED PYRAZOLO[1,5<I>A</I>]-1,3,5-TRIAZINE DERIVATIVES AND THEIR ANALOGUES, PHARMACEUTICAL COMPOSITIONS CONTAINING SAME, USE THEREOF AS MEDICINE AND METHODS FOR PREPARING SAME

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 07/25/2003 as United States Application Number or PCT International

Application No. PCT/FR2003/002354 and was amended on (MM/DD/YYYY) 10/25/2004 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02/09519	FR	07/26/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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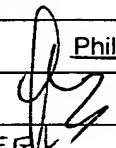
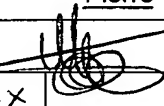
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DECLARATION — Utility or Design Patent Application

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 000530

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<u>000530</u>	OR <input type="checkbox"/> Correspondence address below
Name				
Address				
City		State	ZIP	
Country	Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		<u>Philippe</u>	Family Name or Surname <u>Bernard</u>	
Inventor's Signature 		Date <u>April 14th 2005</u>		
Residence: City <u>Farges-En-Septaine</u> <u>FRX</u>		State	Country <u>France</u>	Citizenship <u>France</u>
Mailing Address:	<u>16, rue des Lilas</u>			
City	<u>Farges-En-Septaine</u>	State	ZIP <u>F-18800</u>	Country <u>France</u>
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		<u>Pierre</u>	Family Name or Surname <u>Raboisson</u>	
Inventor's Signature 		Date <u>April 14th 2005</u>		
Residence: City <u>Eckbolsheim</u> <u>FRX</u>		State	Country <u>France</u>	Citizenship <u>France</u>
Mailing Address:	<u>26, rue de la Chênaie</u>			
City	<u>Eckbolsheim</u>	State	ZIP <u>F-67201</u>	Country <u>France</u>
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

LD-537A

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
<u>Benoît</u>		<u>Joseph</u>	
Inventor's Signature		Date <u>April 14th 2005</u>	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Citizenship
Mailing Address:			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Citizenship
Mailing Address:			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Citizenship
Mailing Address:			
City	State	Zip	Country